

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on bac	k of application) SECRETARY OF STATE
1.	The name of the limited liability com	SECRETARY OF STATE STATE OF IDAHO
2.	The street address of the initial regis	
	and the name of the initial registered Jacob A. Kerksiek	agent at the above address is:
3.	The mailing address for future corres	
4.	Management of the limited liability co	ompany will be vested in: (please check the appropriate box)
	address(es) of at least one initial mar	or more manager(s), list the name(s) and nager. If management is to be vested in the ress(es) of at least one initial member.
	Name	Address
	Jacob A. Kerksiek	12492 North 95th East, Idaho Falls, ID 83401
	Amy S. Kerksiek	12492 North 95th East, Idaho Falis ID 83401
S	signature of at least one person responsion ignature: yped Name: Uacob A. Kerksiek	Secretary of State use only Secretary of State use only